

Application Data Sheet

0657-1004
Supplemental Information Form 2006

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: DATA EXCHANGE PROCESS AND
DEVICE
Attorney Docket Number:: 0657-1004
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 6
Small Entity?:: Yes
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ALAIN JEAN-JACQUES
Middle Name::
Family Name:: MOLINIÉ
Name Suffix::
City of Residence:: CASTELNAU-LE-LEZ
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 210, CHEMIN DE LA ROCHEUSE
Address::
City of Mailing Address:: CASTELNAU-LE-LEZ
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-34170

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ERIC HENRI
Middle Name::
Family Name:: LAVIGNE
Name Suffix::
City of Residence:: SAINT-AUNES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 171, RUE DES NORALES
Address::
City of Mailing Address:: SAINT-AUNES

State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 34130

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: VINCENT POL
Middle Name::
Family Name:: LECLAIRE
Name Suffix::
City of Residence:: MONTPELLIER
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 69, RUE DES FAIENCIERS
City of Mailing Address:: MONTPELLIER
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-34070

Correspondence Information

Correspondence Customer Number:: 00466

Representative Information

Representative Customer Number::	00466
----------------------------------	-------

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/IB2006/000187	2/1/06

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	05 01060	2/1/05	Yes
FRANCE	05 03709	4/13/05	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::